



Long Term Care Facilities (LTCF) Summary Report

Background: The City of Houston has approximately 294 long-term care facilities which consists of nursing homes, assisted living facilities and intermediate care facilities for individuals with intellectual disabilities. Understanding the life-threatening impact COVID-19 could potentially have among residents of these facilities, the Houston Health Department (HHD) began proactively strategizing a mitigation plan. In response to Houston Mayor Sylvester Turner's charge to leverage human and tangible resources, the decision to partner with the Houston Fire Department (HFD) was birthed. HHD understood HFD to be an invaluable resource because of their knowledge of the facilities' operations. This partnership has the potential to be sustainable due to the frequency with which HFD personnel engage with these facilities beyond the COVID-19 pandemic.

Mission: To work in partnership with the community to promote and protect the health and social well-being of Houstonians and the environment in which they live.

Goal 1: Provide onsite observation and technical assistance using a modified version of CDC's Infection Control Assessment and Response (ICAR) to all LTCF located in the City of Houston to:

- Educate on strategies and proactive measures that can be implemented to prevent the introduction of COVID-19
- Identify infections as early as possible
- Prevent spread of COVID-19 in the facility
- Assess and optimize personal protective equipment (PPE) supplies
- Identify and manage severe illness in residents with COVID-19

Goal 2: Review or develop site specific COVID-19 Management Plan

Goal 3: Educate LTCF and HFD personnel on COVID-19 infection, disease transmission, disease containment and mitigation to increase the number of COVID-19 public ambassadors

The HHD has implemented 3 phases of COVID-19 intervention with the LTCFs. The phases are as follows:

- Phase 1 – Onsite ICAR
- Phase 2 – Testing and Disease Containment
- Phase 3 – Weekly Testing of nursing home personnel; if indicated increased frequency of testing of nursing home residents

Phase 1 – Onsite ICAR



Pre-Intervention

- HHD hosted a webinar (111 attendees present) for LTCF facility personnel to explain the health department's role in the COVID-19 pandemic response
- Reviewed the existing CDC ICAR tool
- ICAR sent electronically to all LTCF
- 50 tele-ICAR survey tools completed and returned
- Analyzed preliminary data to inform the final version of the ICAR
- Created a map of LTCF
 - Cluster LTCF geographically for ease of team assignment
 - Align LTCF clusters to a neighboring fire station for future follow-up if/when needed
 - Ensure equitable distribution of LTC

Tools

- HHD's CDC adapted-ICAR
- Resource Guide
 - N95 Fit Testing – all HCWs should be properly fit-tested to decrease disease transmission
 - SETRAC – resource provided to assist with PPE
 - COVID-19 Testing Agencies that provide in-facility testing
 - COVID-19 Community Based Testing Sites
 - CDC Guidance on Testing
 - HHD Contact info for questions/concerns

Intervention (April 24 – May 2, 2020 ~ 8 days)

- Training
 - 34 HFD employees were utilized
 - Web-based ICAR training
 - N95 Fit Testing
 - PPE Donning and Doffing
- Developed nursing home strike teams (NHST) to conduct onsite ICAR and observational assessment
 - Teams were comprised of HHD and HFD personnel
- Complete onsite ICAR tool
- Facilitation of onsite COVID-19 testing in a tiered approach specifically for sites with identified COVID-19 cases
- Facilitated access to PPE
- Completed ICAR returned to HHD for data entry and analysis



Preliminary Data

- The data entry team consisted of 7 staff persons entering data on a part-time basis
- 254 surveys were entered representing 265 facilities; some facilities had several service lines co-located (i.e. nursing home and assisted living co-located)
- Data was entered in Qualtrics, an online survey data platform
- Information by facility on selected questions is available in the HHD created ICS Power-BI Dashboard

First positive reported	3/23/20
Number of facilities with positive cases	32*
Number of facilities with over 3 cases	14*
Deaths	27*

*Information current as of May 17, 2020

Facility by Survey Status

Facility by Type	Touched/ Surveyed	Declined	Exempted*	Facility Closed	Rescheduled	Total
Assisted Living	172	2		13	4	191
Hospital-Based Nursing			2			2
ICF/IID (Intermediate Care Facilities for Individuals with an Intellectual Disability)	24	1		3	2	30
Nursing	69			2		71
Total	265	3	2	18	6	294

*Methodist and Memorial Hermann are exempted because they recently had COVID focused visits from the State and CMS

Facility Education to Staff	% Yes
Facility has provided education and refresher training to Health Care Provider (HCP) on COVID-19 (e.g., symptoms, how it is transmitted)	88.6%
Facility has provided education and refresher training to HCP on sick leave policies and importance of not reporting to or remaining at work when ill	81.5%
Facility has provided education and refresher training to HCP on new policies for source control while in the facility	82.7%



PPE Usage	% Yes
HCP demonstrate competency with putting on and removing PPE	72.4%
HCP been fit tested for the N-95 or higher-level respirator?	24.8%

Post-Intervention

- Implement monthly webinars with LTCF personnel to ensure that they stay current with all CDC recommendations
- Provide summary recommendations to all facilities
- Complete follow-up assessments of facilities where follow-up was indicated
- Recommend and facilitate COVID-19 testing for all residents and staff in facilities with positive COVID-19 cases

High-Level Observations

- The vast majority of the LTCF did not have a respiratory protection program in place to ensure that staff were appropriately fit tested
- Leadership at the sites were often reluctant to test healthcare personnel in fear of not having enough staff to care for residents; however, HHD is strongly recommending testing of all staff and residents.

Phase 2 – Testing and Disease Containment

In a parallel process to Governor Abbott's mandate to test all nursing home staff and residents, HHD was beginning the operational planning to offer testing of all LTCF. Over the past 7 weeks HHD in partnership with HFD has embarked on the task of providing testing at approximately 95 LTCFs (some sites may be duplicated due to repeat testing needs) and through this process has tested ~2,300 staff and residents.

Phase 3 – Weekly Testing

- Hosted an Informational webinar and call to action for nursing home administrators
- Introduced the plan for nursing home personnel to conduct the specimen collection process for 100% of their personnel weekly
- Provided training to administrators and nursing home staff on specimen collection, storage and specimen handling
- Secured a contract with local laboratory to provide weekly lab services with a commitment of 48 hour resulting to ensure timely disease intervention if indicated
- Launched the weekly testing of all nursing home staff with an initial cohort of 5 nursing homes of July 7, 2020



Next Steps:

- HHD will continue to aggressively recruit nursing homes in the City of Houston to participate in weekly testing of all nursing home personnel and residents when indicated with the desired ramp-up of 5 additional facilities per week

Summary

Establishing and maintaining a relationship between HHD and LTCF personnel is critical to preventing the spread of all communicable disease. Ongoing communication and bi-directional information sharing will prove invaluable in our efforts to interrupt disease transmission and protect our most vulnerable populations. The composition of HFD and HHD serving as the nursing home strike team proved extremely beneficial as most LTCF personnel associate them as 'friendly' and 'ally'. This mission afforded HHD the opportunity to increase our public health footprint by educating our fellow co-workers who by the nature of their business will continue to have a routine presence in the LTCF.

Most of the facilities appear to be making strides to correct any deficiencies noted; however, there were some that will require greater presence from HHD and the Texas Health and Human Services Commission (HHSC). As we transition to a new normal, an intentional focus should remain on HHD serving as agents of protection for our most at-risk populations.